

FINAL REPORT

California Coverage Program Initial Focus Group Research Findings

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Department of Health Care Services
Managed Risk Medical Insurance Board

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Table of Contents

- Executive Summary 2
- Study Background and Purpose..... 7
- Study Methodology..... 8
 - Testing Procedure8
- Findings..... 12
 - Experiences Being Uninsured..... 12
 - Experience Shopping for Insurance..... 13
 - The New Marketplace: Awareness and General Attitudes 13
 - Using the Marketplace: Benefits and Barriers 15
 - Buying a Plan: Benefits and Barriers..... 16
 - Alternative Positioning for the Marketplace 17
 - Message Platforms20
 - Promotional Channels to Use22
 - Sources/Messengers23
- Appendices 24
 - Appendix I – Discussion Guide25
 - Appendix II – Changes to Health Insurance Handout (English).....30
 - Appendix III – Changes to Health Insurance Handout (Spanish).....31
 - Appendix IV – Lists of Potential Benefits and Barriers to Using the Marketplace (English)32
 - Appendix V – Lists of Potential Benefits and Barriers to Using the Marketplace (Spanish).....34
 - Appendix VI – Lists of Potential Benefits and Barriers to Purchasing a Health Insurance Plan (English).....36
 - Appendix VII – Lists of Potential Benefits and Barriers to Purchasing a Health Insurance Plan (Spanish).....38

Appendix VIII – Positioning Statement Handouts (English).....40

Appendix IX – Positioning Statement Handouts (Spanish).....43

Appendix X – Message Platform Handouts (English).....46

Appendix XI – Message Platform Handouts (Spanish).....51

Appendix XII – Promotional Channels Handout (English)56

Appendix XIII – Promotional Channels Handout (Spanish)57

Appendix XIV – Sources/Messengers Handout (English).....58

Appendix XV – Sources/Messengers Handout (Spanish)59

Executive Summary

NORC at the University of Chicago has completed an analysis of data from four focus group interviews conducted to learn about consumer perceptions of the California Health Benefit Exchange. This set of interviews focused on the population intending to use the marketplace and/or enroll in a health plan. A total of 36 individuals participated in the focus groups in Fresno and Los Angeles on April 22nd and 23rd. Both English and Spanish speakers were recruited and groups were divided by language and gender.

MAJOR FINDINGS

Major findings from the research are summarized below.

Experiences Being Uninsured

Most respondents reported that they were previously insured. They gave a variety of reasons for not having insurance now—unemployment, lack of employer-provided coverage, aging out of parental plans, even declining employer plans because of the cost. Many complained about the quality of plans that were available, the high premiums and out-of-pocket costs. Some of those who were younger and healthy seemed to have determined that they would get by cheaper if they took their chances without insurance.

Most viewed their lack of insurance as a major problem, one that concerned them greatly. Many worried about incurring large bills if they or a family member were to need expensive care. Their own health was also very important to them given that their income depends on their ability to work. Those with families

were concerned about family dependence on their health in order to make ends meet. Many have evolved ways to cope with their lack of insurance. They use home and/or traditional remedies and self-treat, free or low-cost clinics, emergency rooms or simply do without.

Some had shopped for insurance in the past either at a place of employment or on their own. Most preferred to shop on the web as opposed to through brokers (who they viewed as expensive middlemen) or social service providers.

Attitudes toward New Health Insurance System

Most were aware of the changes coming in 2014 but knowledge levels were uneven. Some respondents were very knowledgeable about the new system, and how it will work, while others were very uninformed. The Spanish-speaking respondents tended to be part of the latter group. In general, there was strong support for the changes but the support was tempered by considerable skepticism, on the part of many, that high quality and affordable plans would actually be available.

There was strong support for the idea of a marketplace where health insurance shopping would be easy and convenient. There was also strong agreement that the inclusion of Medi-Cal would not stigmatize the marketplace. In fact, many of the respondents were familiar with Medi-Cal (some had used it) and viewed it positively. The same was true of the Healthy Families program.

Benefits/Barriers Related to Using the Marketplace

When asked about the benefits of using the marketplace, being able to compare plans, having a choice and the convenience of having the information in one place emerged as important ones. In addition, there was a perception that the marketplace would encourage increased competition between the plans and consumers would benefit from this.

With regard to barriers, there was little concern expressed about using the web or the complexity associated with health plan shopping and selection. Despite this, most wanted access to personal assistance in the event they needed it. Some also expressed concerns about data security and privacy.

Benefits/Barriers Related to Buying Insurance

With regard to the benefits of buying insurance, financial peace of mind emerged as a leading issue along with prevention and access to care when needed. In terms of barriers, the data suggest that price will be extremely important. Most respondents agreed that if they can afford a plan, they will buy one. If not,

they will deploy tried and true coping strategies. When we explored what was affordable, we tended to hear \$25-50 per month for individuals and no more than \$100-150 for a family of four. The data suggest that price and coverage will be the main criteria taken into account when individuals make their decision.

Marketplace Positioning

We explored alternative positioning approaches for the marketplace. Much of the language used in the tested approaches was viewed very positively:

- “a place for one-stop shopping”
- “straightforward and easy to use”
- “a place to go to understand what options you qualify for, how the plans compare and to enroll in the right plan for you”
- “the opportunity to access care”
- references to “those who previously could not afford insurance” benefiting from the marketplace
- references to “self, family and community” as beneficiaries of insurance.

Other language was viewed less positively, at least by some respondents. For example, describing the marketplace as a “trustworthy, reliable source of information” was questioned by those who lacked confidence and trust in state government. The idea of the marketplace as an advocate was also problematic for some who found it hard to see how a marketplace can have a point of view.

The language about “competitive, trustworthy and affordable health care plans” also raised some concerns. These plan attributes were viewed as important by everyone but the language raised expectations and bordered on hype for some of the participants. In addition, the language about “quality health insurance, accessible, and affordable to all” was questioned by those who wondered whether the new system would really deliver on the promise.

Message Platforms/Arguments for Buying Insurance

Of the five message platforms we tested, those emphasizing financial peace of mind, access to care and prevention tested very well. The platforms emphasizing responsibility and more general health and wellbeing did not test well, at least in the forms they were presented in this initial research.

Study Background and Purpose

This report presents findings from initial focus group research conducted to support development of a marketing plan for the California Health Benefit Exchange and project sponsors, DHCS and MRMIB.

The mission of the California Health Benefit Exchange is to increase the number of insured Californians, improve health care quality, lower costs, and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health plan that gives them the best value. In order to be successful, the project sponsors require an outreach and marketing effort targeted to those Californians who are currently underserved by the health care system as well as others who could benefit from the one-stop shopping that the marketplace will provide.

To gain a better understanding of the perceptions and attitudes of potential marketplace users, two phases of focus group research were planned across two important market segments: those intending to use the marketplace to purchase a plan and those who do not plan to participate.

Phase I of this research, which is the focus of this report, looked at consumers who intend to use the Exchange. Phase I had four study objectives:

- Better understand how likely enrollees view health insurance, their needs and concerns related to insurance, as well as the Affordable Care Act and the marketplace.
- Identify the most compelling advantages of enrollment.
- Test initial marketplace positioning.
- Explore campaign messaging approaches.

Study Methodology

Four focus groups were conducted with a total of 36 individuals on April 22-23, 2012. The interviews were conducted in Fresno and Los Angeles, California, with two groups held at each location. Participants came from a variety of socio-economic backgrounds but were all uninsured and between the ages of 18 and 44. One group in each location was conducted in Spanish and one in English. One group in each location was solely composed of men and one solely of women. The English groups were balanced in terms of race/ethnicity, and among all groups, there was a mix of participants with and without children. All participants reported that they and their family members were free of chronic disease. For this project, we only selected individuals who said they were likely to use the marketplace (conceptualized in the focus groups as the “health insurance marketplace”) and purchase a health insurance plan. Exhibit 1 provides a breakdown of the focus group composition by location and language spoken.

Exhibit 1: Focus Group Composition

	Fresno	Los Angeles
English	Male (n=9)	Female (n=10)
Spanish	Female (n=9)	Male (n=8)

Testing Procedure

Each of the focus groups was facilitated by a moderator who used a discussion guide to help frame the discussion and ensure that key areas of interest were addressed. The discussion guide focused on nine topics:

- Experience being uninsured
- Experience shopping for insurance
- Awareness and general attitudes towards the new marketplace
- Benefits and barriers to using the marketplace

- Benefits and barriers to buying a plan
- Alternative positioning for the marketplace
- Message platforms
- Promotional channels to use
- Communication sources/messengers

Each of these topic areas are discussed in further detail below. Please refer to Appendix I for the full version of the discussion guide.

The moderator began each focus group by asking participants to introduce themselves and to share information about where they lived, their family, and their job. Participants were then asked to talk about their experience being uninsured, including whether they had ever had health insurance, how they happened to be without it, where they currently received health care, and whether they had ever had any problems getting care. Lastly, participants spoke to how big a problem they perceived their lack of coverage to be, and what their greatest concerns were about not having health insurance.

The moderator next shifted the discussion to the topic of shopping for health insurance. Participants were asked if they had ever shopped for a health insurance plan before, and if so, where they looked for a plan and what their experience was like.

Next, awareness and general attitudes towards the health insurance marketplace were assessed. The first set of questions related to the perceived importance and benefits of having health insurance and whether it is a society's role to provide all citizens with coverage. Following these questions, participants were asked if they were aware of the changes coming to the health insurance marketplace. After getting their comments, a description of the marketplace was distributed for the participants to read and comment on (see Appendix II for a copy of the Marketplace Description).

The next series of questions focused on the perceived benefits and barriers of using the marketplace. Participants were asked to share what they felt the greatest advantages and disadvantages would be, both generally and to them personally. Moderators had a list of potential benefits and barriers to refer to in case examples were needed to stimulate discussion; however, these lists were not shared with participants (see Appendix III for the Marketplace Benefits and Barriers lists). Next, participants were asked how they would design the marketplace to make it easy to use, and what the most important types of assistance would be. Lastly, the moderator asked respondents if they would be more or less attracted to using the marketplace if it presented information on public health insurance options.

Following the section of questions on *using the marketplace* there was a similar series of questions on *buying a health insurance plan*. In this section, participants were asked to indicate what the biggest advantages and disadvantages would be to buying a plan, both generally and to them personally. Again, lists of potential benefits and barriers were available to moderators to stimulate discussion, although the lists were not shared with participants (see Appendix IV for lists of Benefits and Barriers to Buying a Plan). Also included in this section were questions on what participants would be looking for when selecting a plan. If price was mentioned, participants were prompted to share what they felt an affordable price would be for them.

The next portion of the interview focused on getting participants' reactions to a series of three marketplace positioning statements. The statements were distributed to participants, and the moderator went through them one by one to gather feedback on the following questions:

- Which elements of this paragraph make the most sense to you?
- What stands out to you?
- What is confusing?
- What makes you feel most inspired to sign up for health insurance? Or at the least, most inspired to find out more?
- Are there any particular words or phrases that grab you? Are there any that you most associate with good health care or good health?
- If after reading this paragraph, you had to describe what the marketplace was to a friend using only a few words, what would you choose?

After going through each statement, participants were asked which they felt was the clearest and most appealing. See Appendix V for the Positioning Statements.

Next, participants were shown a series of five message platform statements, which were presented as arguments for using the marketplace to buy insurance (see Appendix VI for the Message Platform Statements). Participants were asked whether they agreed or disagreed with the arguments, and after all of the arguments were presented, which they felt was the best one.

The interview concluded with questions about the best channels/methods for informing them about the marketplace, and who they felt would be the most persuasive in convincing them to use it. Handouts with examples of sources of information and ways to reach people were distributed to help stimulate the discussion (see Appendix VII and VIII for these items).

Once the focus groups were completed, NORC research associates reviewed recordings of each discussion and created summaries of their content.

Findings

Below we summarize the findings. We organize our discussion based on order and topics presented in the discussion guide (Appendix I).

Experiences Being Uninsured

Most participants reported that they had health insurance at some point. They gave a variety of reasons for not having it now, including unemployment, lack of affordable options either through an employer or the individual market, and aging out of parental plans. Particularly among male participants, a common theme was that although employer-sponsored coverage was available, it had been declined due to high cost. One person stated that for him, it would be a choice between paying for insurance and paying for rent. Young and healthy respondents tended to report that they didn't go to the doctor enough to justify paying for insurance, and felt that they could get by cheaper if they took their chances without insurance. Among the Spanish-speaking male group, there was also the feeling that it was more important for their children to have coverage, and when it came to their own health, they just had to fend for themselves:

“Sometimes you have to decide if you're going to get insurance for your family, and you have to decide, is it going to be me, or my son? It's going to be your child instead of you. If a child gets sick with a fever, you have to take them in to the doctor, but if it's you, then you just have to take care of yourself.”

The majority of participants had developed ways to cope with their lack of insurance, such as seeking care through free or sliding-scale clinics (e.g. Planned Parenthood or Sequoia Clinic) or emergency rooms. Emergency room goers expressed dissatisfaction with the services they received, including long wait times and lack of compassion by staff, and felt this was a direct result of being a cash patient. Adding to their dissatisfaction was the high cost of the services they received. One individual reported owing \$7,000 for emergency room visits that she is still struggling to pay off. Other sources of health care mentioned by Spanish-speaking participants included home remedies and self-treatment of illnesses and injuries, and in the case of dental care, going to Mexico to get treatment. Seeking care at medical schools or going to friends/family members who had medical training were also mentioned.

Most participants viewed their lack of insurance as a major problem that concerned them greatly. Many worried about incurring large bills if they or a family member were to need expensive care. Several people mentioned that although they were healthy now, they knew something bad could happen to them at any time, and the fear of that happening and not being able to pay for it was a frequent worry. Several participants in the Spanish-speaking male group agreed that their own health was very important to them given that their income depends on their ability to work. Those with families were concerned about dependence on their health in order to make ends meet. For individuals who had a family history of illness, there was also concern about not being able to get the preventive care they needed to stay healthy and avoid future health issues like diabetes and cancer. One woman from Los Angeles stated, “If I win the lottery, I will put myself in the best hospital to get checked out. I have a daughter. I want to live to see my grandkids. I just want to be able to get the normal checkups.”

Experience Shopping for Insurance

Some participants reported having shopped for insurance in the past either through their employer or by using a broker, insurance company website, or going to a local social service office. Most preferred to shop on the web as opposed to through brokers (who they viewed as expensive middlemen) or social service offices. There were, however, some concerns expressed about the security of online purchases. Several participants agreed that they would only purchase online if they knew that the website was a credible one.

In a Los Angeles group, one woman described her experience getting rate quotes on an insurance website, and then being contacted by phone immediately afterwards. The majority of the group viewed this negatively, and indicated that they would prefer not to be contacted right away.

The New Marketplace: Awareness and General Attitudes

When asked about the importance of health insurance and whether all members of a community should have it, participants tended to agree that it would be a good thing if everybody had coverage and could get access to care. Their motivations for agreeing with this, however, seemed to be more focused on benefits to them as an individual rather than to the community as a whole. One individual in the Los Angeles group mentioned that she didn't feel that it should be mandated, but rather that it should just be *accessible* to everyone who wants it. In all of the groups, the fact that other countries, including those less developed than the U.S., have universal coverage was offered as support for the argument that society is responsible for providing its citizens with health insurance. Access to preventive care was a commonly mentioned

benefit of having health insurance. Both groups of female participants also mentioned that access to health care was important for preventing the spread of communicable diseases.

When it came to awareness of the changes to the health care system coming in 2014, most were at least aware of them, but knowledge levels varied greatly. Some respondents were very knowledgeable about the new system, and how it would work, while others were uninformed. The Spanish-speaking respondents tended to be part of the latter group. Below are some descriptions of what participants thought the changes would encompass:

- “It’s universal health care coverage. It’s privatized – not socialized like in Europe.”
- “You’re going to be forced to buy health insurance. If you show up at the hospital without it, you’re going to be doing something against the law.”
- “It will mean cheaper options. It won’t be totally mandated.”
- “It will be mandatory that everyone has coverage.”
- “Employers will be required to provide insurance to their employees or face a fine.”

One person also mentioned expansion of public program eligibility as being part of the changes, and several others said that it was something that would be paid for out of money taken out of your taxes. In the Spanish-speaking male group, more than half said they had heard of the plan, but didn’t know any details on what the changes would be.

After reading a description of the marketplace, most participants voiced strong support for the changes, although this was tempered by considerable skepticism, on the part of many, that high quality and affordable plans would actually be available. There was the feeling that it sounded “too good to be true” and they would “believe it when they see it.” In a Los Angeles group, several female participants expressed concern over who was deciding what “affordable” was, and whether this would be in line with what they could actually afford to pay. Similarly, they were worried about the quality of care they would receive with a low-cost plan. In the Spanish-speaking male group, there was some confusion over whether the marketplace would offer government plans or plans from private insurance companies or both, and there was concern that it might end up being another profit-seeking organization that didn’t have the consumer’s best interests in mind. Despite these concerns, participants were pleased to hear about having a new way to purchase health insurance and were looking forward to hearing more about what the marketplace had to offer.

Using the Marketplace: Benefits and Barriers

When asked what the main benefits or advantages of using the marketplace would be, many participants mentioned being able to compare plans and have a choice. For some, this meant the ability to view the benefits and levels of coverage offered by different plans and choose the one that best met their health care needs. For others, choice had more to do with being able to compare plans at different price points and being able to pick the most affordable option. Participants liked that the marketplace would encourage competitiveness among the plans to help drive down prices, and that purchasing a plan online would help them avoid associated broker's fees.

A range of other benefits related to convenience were also mentioned by participants. Participants liked that it was “one-stop shopping,” and that they could access the marketplace 24 hours a day and view information at their own pace without pressure from salespeople. They also felt that it would simplify the process of identifying and purchasing a plan, helping them avoid bureaucracy and extra paperwork.

When discussing the barriers or disadvantages of using the marketplace, the most commonly cited concerns were related to computer security and privacy. Participants worried that hackers might be able to access their personal information and/or credit card number once entered in the system, or that their information would be shared with a third-party. Another perceived disadvantage was not being able to talk to a person “face-to-face” or over the phone if they had questions or needed help. Some worried that they might purchase a plan that wasn't really right for them, finding out later that there was a catch or “loop-hole” in the coverage. One individual also mentioned that not being able to purchase a plan online with cash as a disadvantage. Simply not being able to find an affordable plan through the marketplace was also brought up as a potential barrier.

Participants made a number of suggestions for how to make the marketplace easy to use. Adding a chat feature, having access to an operator or technical support person, and being mailed an informational brochure were offered as possible approaches. Participants stressed that they wanted the information to be presented in language that was easy to understand, and with all of “the fine print” clearly spelled out. As one participant put it, “You should have all of the information you need to equip you to make the right decision.”

To help address concerns related to online security, participants suggested having some sort of verification that the website is secure, for example, by including an official seal or logo. One person mentioned that the website would be more credible if it had an address for a physical location listed so

that users could verify that the organization existed and was legitimate. One individual said that as long as the website had a “.org” or “.gov” address, she would consider it safe and trustworthy.

Participants also mentioned that the marketplace should make use of good web design principles and be interactive. Part of web usability was also the availability of the service in multiple languages. Several individuals expressed that they would like to see features like user reviews or a star-rating system (similar to what is available on Amazon and other shopping websites) to help them weigh the pros and cons of the plans. Having the ability to set up auto-pay and receive informational emails about upcoming bills or plan changes was also mentioned. Participants provided examples of websites that they felt were easy to use and that the marketplace could use as a model – these included Amazon, Craig’s List, Google, Ebay, DMV and the IRS website.

Among the groups, there was strong agreement that the inclusion of public health insurance programs such as Medi-Cal would not stigmatize the marketplace. In fact, many of the respondents were familiar with Medi-Cal (some had used it) and viewed it positively. The same was true of the Healthy Families program. Participants were glad to hear that the marketplace would help them find out if they qualified for a free plan that would help them save money.

Buying a Plan: Benefits and Barriers

Once the discussion shifted to the benefits and advantages of actually purchasing a health insurance plan, “peace of mind” emerged as a leading perceived benefit. For participants, peace of mind encompassed both financial security as well as the absence of worry about not getting needed health care. Regarding the financial aspect, participants mentioned that it would make them feel better knowing they were covered in the case of an emergency, and that they wouldn’t have to face financial ruin in the event of an unexpected accident or illness. Participants also reported that having the confidence to go to the doctor when they needed it, and the ability to reduce risk through preventive care, would also help reduce their stress. Other perceived benefits of enrolling in a health plan included “better health,” “access to better care,” and “being healthy for your family and loved ones.”

When it came to barriers or disadvantages, most of the concern was about cost and coverage. Although participants recognized the benefits of having health insurance (both financial and health-related), the decision to actually purchase a plan for them depended on the price and whether it was affordable. A view commonly expressed among male participants was that they didn’t see the value of having coverage and paying for insurance when they rarely used the health care system.

Another common concern among participants was not receiving the expected level of coverage after purchasing a plan. Participants worried about “not understanding the fine print” of their plan, and finding out later that certain services are not covered or that your preferred doctor does not accept the plan. Heightening their anxiety was the belief that by the time these coverage gaps were discovered, they would have already paid for the insurance and be “locked in” to a contract.

When asked what they would look for in selecting a health insurance plan, cost was again mentioned as a top consideration. The consensus on what constituted affordable was \$25-\$50 per month for individuals and no more than \$100-\$150 per family. Other factors participants said they would consider when selecting a plan were related to coverage, including whether they would be able to pick the doctor and hospital they could go to, and whether services like dental and vision would be covered.

Alternative Positioning for the Marketplace

Participants were presented with three different positioning statements to describe the marketplace. The key themes of these statements are summarized below:

- Paragraph A: Straightforwardness and ease of use
- Paragraph B: Collective responsibility
- Paragraph C: The marketplace as a health advocate

Exhibit 2: Paragraph A

For Californians seeking affordable health insurance options, the new health insurance marketplace is the trustworthy, reliable source of information. It is straightforward and easy to use. It is the one-stop shopping website to go to for health insurance, to understand what options you qualify for, how they compare and to enroll in the right plan for you.

In **Paragraph A**, the language that resonated the most with participants was “affordable,” “straightforward and easy to use,” and “compare and to enroll in the right plan for you.” While some individuals liked the part about “one-stop shopping,” others felt it sounded gimmicky. “[T]rustworthy, reliable source of information” was also problematic language for some, who felt that as a new website, the marketplace would have to earn that description rather than claiming it from the outset. Others also

took issue with this language due to lack of trust in state government. Another concern raised by some was that the statement focused only on what the website offered, while leaving out any mention of how it would help them access health care or promote better health.

Exhibit 3: Paragraph B

The health of our families and our communities is a joint-responsibility. This idea is brought to life by the new health insurance marketplace that delivers competitive, trustworthy and affordable health care plans so that more Californians can be covered. For individuals and small business owners seeking affordable options, the marketplace offers them the opportunity to access care and invest in health, for themselves, their family, and community.

Reaction to the language in **Paragraph B** was mixed. Participants in the Spanish-speaking male group liked the descriptors “competitive, trustworthy and affordable,” and that it promoted “joint-responsibility” and “invest[ment] in health.” The concept of joint responsibility also resonated with participants in the other groups, although some took issue with the idea, stating that they wanted to know what the marketplace offered to them personally rather than how it benefitted the community as a whole. Across all groups, language concerning “the opportunity to access care” and references to “self, family and community” as beneficiaries of insurance were viewed positively.

Language in Paragraph B concerning “small business owners” drew mixed reactions. Some identified it as a positive, pointing out that it would lower costs for employers who would in turn be able to offer more affordable plans to them as employees. Others felt that it was confusing and raised questions about the marketplace and the type of plans it offered. As one participant put it, “I’m an individual. I don’t want to have to go weed through plans that are for small business owners that have multiple employees.” Others felt that including “small business owners” made it sound like the marketplace offered expensive plans that wouldn’t be affordable to an individual.

In both of the English-speaking groups, the language concerning “competitive, trustworthy and affordable health care plans” was viewed with skepticism. Although it was agreed that these attributes were important to a health insurance plan, the language raised expectations and bordered on hype for some. Several in the English-speaking female group also did not like the term “invest,” with one participant stating, “An investment sounds like money I have to pay but may not get a return on.”

Exhibit 4: Paragraph C

The new health insurance marketplace is committed to ensuring greater health for Californians. Health insurance and preventive care are part of better health. The new marketplace is helping to make sure quality health insurance is now accessible and affordable to all Californians, including those who previously could not afford it. Now, uninsured Californians have an advocate and the opportunity for greater health and security.

After reading **Paragraph C**, participants voiced positive reactions to phrases such as “those who previously could not afford insurance” and “all Californians,” since these were both groups they could identify with. The statement “quality health insurance is now accessible and affordable to all” was embraced as a goal to strive for; however, some questioned whether the marketplace would truly be able to deliver on that promise. The concept of the marketplace as an advocate was also hard to grasp for some. Some viewed the marketplace as an organization selling health insurance, and couldn’t see how such an entity could advocate for your health.

When voting for the most appealing statement, Paragraph B was the favorite among the Spanish-speaking male participants, who felt it gave them the most information and educated them the most about what the marketplace had to offer. English-speaking female participants identified the most with Paragraph C, which they said gave them an optimistic and positive perception of the marketplace. Among the remaining groups, there was no clear front runner among the positioning statements. Participants’ endorsement of phrases such as “affordable,” “right plan for you,” and “opportunity to access care,” in addition to “those who previously could not afford insurance” suggest that a campaign powerfully acknowledging the problems and needs of the insured would be very successful.

Message Platforms

Five message platform statements were presented to participants, with each statement presenting a different argument for using the marketplace and enrolling in a health insurance plan. The themes of these platform statements were as follows:

- Argument 1: Economic security
- Argument 2: Prevention
- Argument 3: My responsibility
- Argument 4: Access
- Argument 5: Health and well-being

Exhibit 5: Argument 1

“It’s important to protect yourself and your family from risk. Having health insurance can protect you from financial ruin in case of an unforeseen accident or illness. Now it’s truly possible to afford health insurance. The new online health benefit marketplace is a one-stop shopping site where you can access information and competitively price the plan you need for protection and peace of mind.”

For **Argument 1**, participants identified with the statements about “protection” and “peace of mind.” Participants in the English-speaking female group stated that while they agreed with the message (“having health insurance provides economic security”), they felt the language had too many negative associations (“financial ruin” in particular) and was “too much of a downer.” Participants in this group argued that the message should focus on the positive benefits of obtaining health insurance, rather than “scaring you into getting protection.”

Exhibit 6: Argument 2

“Prevention is the key to living a long and healthy life. Regular health care is the first step to live healthily. Without health insurance many of us do not have the opportunity to get annual physical exams, cancer screening, vaccines, well baby care and other preventive health care. The new health insurance marketplace allows people to shop for affordable, quality health plans options. It is dedicated to helping individuals and families get the preventive care they need, all throughout the year, by making health insurance more affordable.”

The majority of participants strongly agreed with the language included in **Argument 2**, which focused on prevention. Participants liked that it had details on what types of services would be provided under the plans and felt that it addressed the realities of their current situation (i.e., lack of access to preventive care). This statement tested particularly well among male participants, receiving an even higher rating than the economic security language included in Argument 1.

Exhibit 7: Argument 3

“We should all have health insurance. Maintaining your own health and that of your family and community are all related. The new health insurance marketplace is now making health insurance affordable for uninsured Californians. By accessing affordable, quality health insurance options through the marketplace, each one of us is doing our part to create a world where healthy living is, well, a way of life.”

Argument 3 with its focus on responsibility tested the least well among the four groups. Participants felt that the statement supported mandated health insurance coverage, which some individuals did not agree with. Participants also expressed skepticism that everybody would be able to access an affordable plan through the marketplace, and felt that in order for everyone to have coverage, the “price had to be right.”

Exhibit 8: Argument 4

“Many people know they need medical care but they keep putting it off because they don’t have insurance. Health care and health insurance can be expensive. Now, it is possible to afford them. The new online health benefit marketplace is offering new, high quality insurance at low prices. You can shop and compare options to find the plan that is right for you. Some people may even qualify for tax credits that help reduce the costs even more. And, some people may even qualify for free health insurance. Now, it’s finally possible for everyone to have access to health insurance and the health care they deserve.”

Support for **Argument 4** was highest among female participants, who liked the statements about “high quality insurance at low prices” and “finally” being able to access health care. Participants also liked mention of “free” plans and those available at a reduced rate through “tax credits.” Among male respondents, there were some questions as to the quality of the coverage offered by the low-cost or free plans, and who would qualify for these plans.

Exhibit 9: Argument 5

“There is more to health than not being sick. Good health is about wellness. It is about happiness, balance and thriving. The new marketplace wants to be your partner in being well and living life to the fullest. We want to help you manage your health through prevention and affordable quality health insurance. At the marketplace, you will find affordable, high quality insurance plans that can put you on the path to true wellbeing.”

Argument 5 received a positive reaction from English-speaking female participants, but was less strongly endorsed by the other three groups. Participants liked that the statement mentioned “prevention” and “affordable, high quality insurance plans.” Spanish-speaking participants also liked the mention of a “partner” and someone who could “help you manage your health.”

Overall, the platforms focusing on economic security, prevention, and access to care (Arguments 1, 2, and 4) were the most appealing to participants, while statements emphasizing responsibility and general well-being (Arguments 3 and 5) did not test as well, at least in the forms presented in this initial research.

Promotional Channels to Use

Most participants endorsed television, radio and (printed) newspapers as good ways to get the message out about the marketplace. Television ads as well as features on news programs were offered as suggestions, and Spanish-speaking groups specifically mentioned Univision. Views on social media and text messaging were mixed, with younger participants being more receptive to the idea. Providing information at the workplace was mentioned by both groups of male participants; however, when presented as an option to English-speaking female participants, it was not viewed as a good method, perhaps because most individuals in the group were unemployed or self-employed. Some support was also offered for the following channels:

- Schools
- PTA meetings
- Doctor’s offices
- Free clinics
- Pharmacies
- Churches
- Lion’s Clubs/Rotary Clubs

- Red Cross
- Mailed flyers or brochures

Sources/Messengers

Participants expressed support for a variety of sources who they felt would be good messengers for disseminating information about the marketplace. One category included media figures, such as television commentators and reporters. There were mixed views on whether public officials would be effective spokespeople, although participants in Los Angeles spoke positively about Mayor Villaraigosa. Doctors, school officials, and church representatives were also mentioned as good messengers. Messaging through the California Department of Public Health as well as through other public programs (e.g., Medi-Cal, Healthy Families) was also mentioned. Some argued that the most persuasive messengers would likely be people like themselves through “word of mouth advertising.”

Appendices

Appendix I – Discussion Guide

California Coverage Campaign

Focus Group Research

DISCUSSION GUIDE

I. Introductions, Explanation of Process and Ground Rules (10 min)

The moderator will introduce himself and explain the focus group process and ground rules. Each participant will also introduce themselves and comment on where they live, something about their family and what they do for a living.

II. Forming the Group: Experiences Being Uninsured (10 min)

- a. Today we'll be talking about health insurance. You all reported that you are currently uninsured. Did you ever have health insurance? (IF SO GET WHEN; GET RECENT HISTORY.)
- b. How did you happen to be without it? (GET STORIES ABOUT HOW THEY LOST OR GAVE UP COVERAGE.)
- c. When you need health care now, what do you do? Where do you go to get it? (GET DETAILS.)
- d. Have there been any problems in getting care when you needed it? (IF SO, GET WHAT PROBLEMS HAVE BEEN AND WHAT THEY DID ABOUT IT.)
- e. Overall, how big a problem is your lack of health insurance? (GET WHY; GET REASONS.)
- f. What are your greatest concerns about not having insurance? (GET MULTIPLE ANSWERS AND SPECIFICS.)

III. Experience Shopping for Insurance (10 min)

- a. Have you ever shopped for a health insurance plan before, say at work or through some program or organization you were eligible for? (GET DETAILS.)
- b. Where did you look for health insurance? (ONLINE, BROKER, ETC)
- c. What was your experience like? (GET STORIES.)
- d. Was it easy or difficult? If it was difficult, what was most difficult about it? (GET DETAILS.)

- e. How informed do you think you are about health insurance and the things to think about in selecting a plan for yourself or your family?
- f. (IF NOT VERY INFORMED) What do you most need to know?
- g. In the future, how would you consider purchasing health insurance? Would you consider purchasing coverage on-line, through an agent/broker, work with a person who can help them (e.g. Assister) or county welfare office?

IV. The New Marketplace: Awareness and General Attitudes (20 min)

- a. Is it important to you to have health insurance? Should all members of a community or society have health insurance? (GET WHY)
- b. Is it a society's role to provide all citizens with health insurance?
- c. Would it benefit you and your family if the community had access to health insurance?
- d. Is your health important to you? Does your health affect other people?
- e. Have you heard or read much about the changes that are coming in the health care system...the fact that it will soon be possible for everyone to get health insurance plans at affordable prices? (IF YES, GET WHAT THEY HAVE HEARD OR READ.)
- f. (HAND OUT THE MARKETPLACE INFORMATION SHEET AND THEN READ WHAT IT SAYS :) In January 2014 there will be a way for uninsured Californians to get health insurance through what is called a health insurance marketplace. The new online marketplace, which is being organized by state government, will offer a number of different affordable and high quality health plans. Many will be private insurance plans but there will also be some plans offered by the government. All the plans will have been prescreened by the state government to ensure that they meet certain quality standards. The cost of the plan will depend on your income and will be affordable. Some people will also get a tax credit to help reduce the cost of the insurance plan. You will be able to use the online marketplace and get general information about health insurance, compare the plans and actually purchase one. You will also be able to get assistance and enroll in a plan over the phone or in person if you don't want to go online to do it.
- g. Do these changes sound like a good idea to you or not? (GET REASONS.)

V. Using the Marketplace: Benefits and Barriers (15 min)

- a. When we spoke to you on the phone you said you were very interested in using the marketplace to get more information and compare the plans. For you, what are the main benefits or advantages of using the marketplace? (GET MULTIPLE ANSWERS AND SPECIFICS. GET THEM TO ELABORATE ON EACH ADVANTAGE SO WE FULLY UNDERSTAND IT AND WHY IT IS IMPORTANT. WRITE THEM UP ON A NEWSPRINT BOARD SO EVERYONE CAN SEE THE LIST OF ADVANTAGES.)

- b. Are there any other advantages or benefits? (PROBE FURTHER. USE OUR LIST TO PROBE AS NEEDED)
- c. Which of these advantages or benefits is most important to you personally? (GET COUNT OF HOW MANY THINK EACH ONE IS THE MOST IMPORTANT; THEN DO THE SAME FOR THE SECOND MOST IMPORTANT.)
- d. Let's talk for a minute about any barriers or disadvantages of using the marketplace. Can you think of any? (GET MULTIPLE ANSWERS AND SPECIFICS. GET THEM TO ELABORATE ON EACH DISADVANTAGE SO WE FULLY UNDERSTAND IT AND WHY IT IS IMPORTANT. WRITE UP ON NEWSPRINT BOARD SO EVERYONE CAN SEE THE LIST OF DISADVANTAGES.)
- e. Can you think of any others? (PROBE FURTHER. USE OUR LIST TO PROBE AS NEEDED.)
- f. Which of these barriers or disadvantages is most important to you personally? (GET COUNT OF HOW MANY THINK EACH ONE IS THE MOST IMPORTANT THEN DO THE SAME FOR THE SECOND MOST IMPORTANT.)
- g. If you were designing the marketplace how would you design it so that it was easy to use? What are the most important things you'd like it to have? (PROBE FOR SPECIFICS AND MULTIPLE ANSWERS.)
- h. What kind of assistance would be important to you? (PROBE FOR SPECIFICS AND MULTIPLE ANSWERS. PROBE TO FIND OUT WHAT TYPES OF ASSISTANCE ARE MOST IMPORTANT TO THE GROUP AS A WHOLE.)
- i. The marketplace will also be able to connect people who qualify to public programs like Medi-Cal. What do you think about this? Would you be more attracted or less attracted to the marketplace if you saw messages about public health insurance options (insurance offered through the government)?

VI. Buying a Plan: Benefits and Barriers (15 min)

- a. What about actually buying a plan? You indicated a strong interest in enrolling in a plan. For you, what would be the advantages or benefits of enrolling in a health insurance plan? (PROBE FOR MULTIPLE ANSWERS AND SPECIFICS. WRITE RESPONSES ON NEWSPRINT SO WHOLE GROUP CAN SEE.)
- b. Are there any others? (PROBE FURTHER. USE OUR LIST TO PROBE AS NEEDED.)
- c. Which of these advantages is the most important to you personally? (GET COUNT OF HOW MANY THINK EACH ONE IS THE MOST IMPORTANT THEN DO THE SAME FOR THE SECOND MOST IMPORTANT.)

- d. What about the barriers to buying a plan, the disadvantages of doing so? (GET MULTIPLE ANSWERS AND SPECIFICS. GET THEM TO ELABORATE ON EACH DISADVANTAGE SO WE FULLY UNDERSTAND IT AND WHY IT IS IMPORTANT. WRITE UP ON NEWSPRINT BOARD SO EVERYONE CAN SEE THE LIST OF DISADVANTAGES.)
- e. Can you think of any others? (PROBE FURTHER. USE OUR LIST TO PROBE AS NEEDED.)
- f. Which of these disadvantages is the most important to you personally? (GET COUNT OF HOW MANY THINK EACH ONE IS THE MOST IMPORTANT THEN DO THE SAME FOR THE SECOND MOST IMPORTANT.)
- g. What will you look for in selecting a plan? What will be the main factors you consider? (GET MULTIPLE ANSWERS AND SPECIFICS.)
- h. (ON PRICE, PROBE ON WHAT THEY WOULD CONSIDER AFFORDABLE. AT ABOUT WHAT PRICE POINT WOULD THEY NOT PURCHASE A PLAN?)

VII. Alternative Positioning for the Marketplace (15 min)

- a. Here are some different ways the marketplace might be presented to Californians. We are interested in your reactions to them.
- b. (SHOW ALTERNATIVE POSITIONING STATEMENTS AND PROBE FOR REACTIONS; POSITIONING STATEMENTS ARE LABELED PARAGRAPH A, PARAGRAPH B, PARAGRAPH C)
- c. (ON EACH, ASK THE FOLLOWING)
 - Which elements of this paragraph make the most sense to you?
 - What stands out to you?
 - What is confusing?
 - What makes you feel most inspired to sign up for health insurance? Or at the least, most inspired to find out more?
 - Are there any particular words or phrases that grab you? Are there any that you most associate with good health care or good health?
 - If after reading this paragraph, you had to describe what the marketplace was to a friend using only a few words, what would you choose?
- d. (GET WHICH THEY THINK IS CLEARST AND MOST APPEALING.)

- e. What do you think of the term “health insurance marketplace”? Is it a good name? What kind of thoughts or images does “marketplace” evoke for you? (PROBE FOR MULTIPLE RESPONSES.)
- f. What might you call it? (PROBE FOR MULTIPLE RESPONSES.)

VIII. Message Platforms (20 min)

- a. I'd like to show you some different arguments people have made for using the marketplace and enrolling in a health insurance plan. For each, tell me whether you agree or disagree. (HAND OUT EACH OF THE MESSAGE STATEMENTS IN THE FORM OF QUOTES. PROBE USING THE FIRST FIVE QUESTIONS WE USED ABOVE ON THE POSITIONING STATEMENTS. STATEMENTS ARE LABELED ARGUMENT 1, ARGUMENT 2, ARGUMENT 3, ARGUMENT 4 AND ARGUMENT 5)
- b. Which of the arguments do you think is the best one? (GET WHY)

IX. Promotional Channels to Use (5 min)

- a. Next year, the marketplace will be launching a campaign to inform Californians about what will be available and urge them to get insurance. Here is a list of ways that the marketplace may be putting out its messages. (HAND OUT LIST.) Which way is best for reaching you? Where would you most like to see information about the marketplace?

X. Sources/Messengers (5 min)

- a. I'd like to hand out a list of different types of people. Which of these do you think would be most persuasive in convincing people like you to use the marketplace and enroll in a health plan? Think of people like you who may be uncertain about whether to do so. (PROBE FOR WHICH WOULD BE MOST AND LEAST PERSUASIVE AND WHY.)

XI. Thanks and Conclusion

TOTAL LENGTH: 125 MINUTES

Appendix II – Changes to Health Insurance Handout (English)

Changes to Health Insurance System in 2014

In January 2014 there will be a way for uninsured Californians to get health insurance through what is called a health insurance marketplace. The new online marketplace, which is being organized by state government, will offer a number of different affordable and high quality health plans. Many will be private insurance plans but there will also be some plans offered by the government. All the plans will have been prescreened by the state government to ensure that they meet certain quality standards. The cost of the plan will depend on your income and will be affordable. Some people will also get a tax credit to help reduce the cost of the insurance plan. You will be able to use the online marketplace and get general information about health insurance, compare the plans and actually purchase one. You will also be able to get assistance and enroll in a plan over the phone or in person if you don't want to go online to do it.

Appendix III – Changes to Health Insurance Handout (Spanish)

Cambios al Sistema de Seguro de Salud en el 2014

En enero de 2014 habrá una manera para que los Californianos que no cuentan con seguro de salud puedan obtener uno a través de lo que se llama un mercado de seguro de salud de California. El nuevo mercado en internet, que está siendo organizado por el gobierno estatal, ofrece una serie de diferentes planes de salud accesibles y de alta calidad. Muchos serán los planes de seguros privados, pero también habrá algunos planes ofrecidos por el gobierno. Todos los planes han sido pre-seleccionados por el gobierno del estado para asegurarse que cumplan con ciertos estándares de calidad. El costo del plan dependerá de su ingreso y será accesible. Algunas personas también recibirán un crédito fiscal para ayudar a reducir el costo del plan de seguro. Usted podrá utilizar el mercado por el internet y obtener información general sobre diferentes seguros de salud, comparar planes y de hecho comprar el que prefiera. También podrá obtener asistencia e inscribirse en un plan a través del teléfono o en persona si usted no quiere usar el internet para hacerlo.

Appendix IV – Lists of Potential Benefits and Barriers to Using the Marketplace (English)

Benefits of Using the Marketplace

1. Learning about health insurance, what to think about and consider
2. Ability to get insurance even if someone in my family has a pre-existing condition
3. Being able to get an affordable plan and pay affordable premiums
4. Knowing that the government has screened the plans for quality
5. Seeing health insurance plans tailored to my individual needs
6. Having a variety of insurance plans to choose from
7. Ability to do side by side comparisons of different plans
8. Seeing if I qualify for a public plan like MediCal or Healthy Families
9. Having everything you need in one place
10. Getting unbiased information and advice
11. Friendly, helpful service when I need it
12. Getting information in plain language that is easy to understand

Barriers to Using the Marketplace

1. Discomfort using the web
2. Discomfort with complexities of health insurance
3. Would like to speak to a real person
4. Don't like government involvement in this
5. Won't be able to figure out actual cost
6. Don't understand tax credits
7. Don't want to provide private information about my family
8. Won't be able to understand information not in my primary language

Appendix V – Lists of Potential Benefits and Barriers to Using the Marketplace (Spanish)

Beneficios de Usar el Mercado

1. Aprender acerca de seguro de salud, lo que debo de pensar y considerar
2. Posibilidad de obtener un seguro medico incluso si alguien de mi familia tiene una condición pre-existente.
3. Ser capaz de obtener un plan económico y pagar deducibles económicos.
4. Saber que el gobierno ha examinado los planes de calidad
5. Ver que los planes de salud son adaptados a mis necesidades individuales.
6. Tener una variedad de planes de seguro de los cuales puedo elegir
7. Capacidad de hacer comparaciones de diferentes planes.
8. Ver si califico para un plan publico como Medi-Cal or Healthy Families
9. Tener todo lo que necesito en un solo lugar
10. Obtener información imparcial y consejos
11. Servicio amable y servicial cuando lo necesito
12. Obtención de información en un lenguaje sencillo que sea fácil de entender

Obstaculos de Usar el Mercado

1. Incomodidad con el uso del internet
2. Incomodidad con la complejidad del seguro de salud
3. Me gustaría hablar con una persona en vivo
4. No me gusta que el gobierno se involucre en esto
5. No seré capaz de averiguar el costo real
6. No entiendo los créditos fiscales
7. No quiero dar información privada acerca de mi familia
8. No seré capaz de entender la información que no está en mi lengua materna

Appendix VI – Lists of Potential Benefits and Barriers to Purchasing a Health Insurance Plan (English)

Benefits of Enrolling in a Plan

1. Being well and thriving in life
2. Getting preventative health care (screening tests, immunizations for children, family planning assistance)
3. Avoiding financial disaster if you get sick or seriously injured
4. Having the government pay you to have health insurance
5. Taking advantage of the tax credits to further lessen what you have to pay
6. Taking care of your family
7. Peace of mind – not having to worry about an unanticipated illness or accident
8. Freedom to change jobs or start a business of my own

Barriers to Enrolling in a Plan

1. Incurring the expense
2. Fear or discomfort with topic of health insurance
3. Government involvement

Appendix VII – Lists of Potential Benefits and Barriers to Purchasing a Health Insurance Plan (Spanish)

Beneficios de Inscribirse en un Plan

1. Estar bien y prosperar en la vida
2. Cómo obtener atención de salud preventiva (pruebas de detección, vacunas para los niños, asistencia de planificación familiar)
3. Evitar el desastre financiero si usted se enferma o resulta lesionado/a
4. Que el gobierno le pagara a usted por tener seguro de salud
5. Tomar ventaja de los créditos fiscales para reducir aún más lo que tienes que pagar
6. Cuidado de su familia
7. La tranquilidad de no tener que preocuparse acerca de una enfermedad inesperada o un accidente.
8. La libertad de cambiar de trabajo o iniciar un negocio propio

Obstaculos de Inscribirse en un Plan

1. Incurrir el gasto
2. Miedo o incomodidad con el tema del seguro de salud
3. Intervención del gobierno

Appendix VIII – Marketplace Positioning Statements (English)

Paragraph A

For Californians seeking affordable health insurance options, the new health insurance Marketplace is the trustworthy, reliable source of information. It is straightforward and easy to use. It is the one-stop shopping website to go to for health insurance, to understand what options you qualify for, how they compare and to enroll in the right plan for you.

Paragraph B

The health of our families and our communities is a joint-responsibility. This idea is brought to life by the new health insurance Marketplace that delivers competitive, trustworthy and affordable health care plans so that more Californians can be covered. For individuals and small business owners seeking affordable options, the Marketplace offers them the opportunity to access care and invest in health, for themselves, their family, and community.

Paragraph C

The new health insurance Marketplace is committed to ensuring greater health for Californians. Health insurance and preventive care are part of better health. The new Marketplace is helping to make sure quality health insurance is now accessible and affordable to all Californians, including those who previously could not afford it. Now, uninsured Californians have an advocate and the opportunity for greater health and security.

Appendix IX – Marketplace Positioning Statements (Spanish)

Paragraph A

Para los californianos que buscan opciones económicas de seguro de salud, el mercado de seguro de salud de California es la fuente de información mas segura y digna de confianza. El Mercado es sencillo y fácil de usar. Es el sitio web donde puede hacer todas sus compras de seguro de salud a la vez, puede entender las opciones disponibles para la que usted califica, cómo se comparan y como inscribirse en el plan indicado para usted.

Paragraph B

La salud de nuestras familias y nuestras comunidades es una responsabilidad conjunta. Esta idea cobra vida por el mercado de seguro de salud de California que ofrece programas de atención de salud competitiva, confiable y planes de salud accesibles para que más californianos tengan cobertura. Para los individuos y propietarios de pequeñas empresas que buscan opciones económicas, el mercado les ofrece la oportunidad de evaluar cada opción para invertir en salud, para sí mismos, su familia y la comunidad.

Paragraph C

El nuevo mercado de seguro de salud de California se compromete a garantizar una mejor salud para los californianos. El seguro de salud y los cuidados preventivos son parte de una mejor salud. El nuevo mercado está ayudando a que su seguro de salud sea de calidad y accesible para todos los californianos, incluyendo a los que antes no podían pagarlo. Ahora, los californianos sin seguro médico tienen un defensor y la oportunidad de mayor salud y seguridad.

Appendix X – Message Platforms (English)

Argument 1

“It’s important to protect yourself and your family from risk. Having health insurance can protect you from financial ruin in case of an unforeseen accident or illness. Now it’s truly possible to afford health insurance. The new online health benefit marketplace is a one-stop shopping site where you can access information and competitively price the plans you need for protection and peace of mind.”

Argument 2

“Prevention is the key to living a long and healthy life. Regular health care is the first step to live healthily. Without health insurance many of us do not have the opportunity to get annual physical exams, cancer screening, vaccines, well baby care and other preventive health care. The new health insurance marketplace allows people to shop for affordable, quality health plans options. It is dedicated to helping individuals and families get the preventive care they need, all throughout the year, by making health insurance more affordable.”

Argument 3

“We should all have health insurance. Maintaining your own health and that of your family and community are all related. The new health insurance Marketplace is now making health insurance affordable for uninsured Californians. By accessing affordable, quality health insurance options through the Marketplace, each one of us is doing our part to create a world where healthy living is, well, a way of life.”

Argument 4

“Many people know they need medical care but they keep putting it off because they don’t have insurance. Health care and health insurance can be expensive. Now, it is possible to afford them. The new online health benefit marketplace is offering new, high quality insurance at low prices. You can shop and compare options to find the plan that is right for you. Some people may even qualify for tax credits that help reduce the costs even more. And, some people may even qualify for free health insurance. Now, it’s finally possible for everyone to have access to health insurance and the health care they deserve.”

Argument 5

“There is more to health than not being sick. Good health is about wellness. It is about happiness, balance and thriving. The new marketplace wants to be your partner in being well and living life to the fullest. We want to help you manage your health through prevention and affordable quality health insurance. At the marketplace, you will find affordable, high quality insurance plans that can put you on the path to true wellbeing.”

Appendix XI – Message Platforms (Spanish)

Argument 1

“Es importante protegerse a sí mismo y a su familia contra riesgo. Tener un seguro de salud puede proteger de la ruina financiera en caso de un accidente o enfermedad imprevista. Ahora es realmente posible pagar un seguro médico. El nuevo mercado de seguro de salud de California es un sitio en internet único donde se puede acceder información y precios competitivos de los planes necesarios para la protección y la tranquilidad mental.”

Argument 2

“La prevención es clave para vivir una vida larga y saludable. Atención médica regular es el primer paso para vivir de manera saludable. Sin seguro de salud muchos de nosotros no tenemos la oportunidad de obtener exámenes físicos anuales, exámenes de cáncer, vacunas, exámenes de cuidado de bebé y otros servicios de salud preventiva. El mercado de seguro de salud de California permite a las personas realizar sus compras a precios accesibles y opciones de planes de salud de calidad. Está diseñado para ayudar a que los individuos y las familias reciban la atención preventiva que necesitan, durante todo el año, haciendo que el seguro de salud sea más accesible.”

Argument 3

“Todos debemos tener seguro de salud. El mantenimiento de su propia salud, de su familia y la comunidad están relacionados. El nuevo mercado de seguro de salud de California está haciendo el seguro de salud accesible para los californianos sin seguro médico. Al tener acceso a opciones de calidad de seguro de salud a través del mercado, cada uno de nosotros estamos haciendo nuestra parte para crear un mundo donde la vida sana es una forma de vida.”

Argument 4

“Muchas personas saben que necesitan atención médica, pero siguen postergándola porque no tiene seguro médico. La atención de salud y seguro de salud puede ser costoso. Ahora es posible pagarlo. El nuevo mercado de seguro de salud de California está ofreciendo un nuevo seguro, de alta calidad a precios bajos. Usted puede hacer compras y comparar las opciones para encontrar el plan que sea adecuado para usted. Algunas personas incluso pueden calificar para los créditos fiscales que ayudan a reducir los costos aún más. Incluso, algunas personas pueden calificar para seguro médico gratuito. Ahora, finalmente es posible que todos tengan acceso a seguro de salud y al cuidado de la salud que merecen.”

Argument 5

“La salud es más que no estar enfermo. La buena salud es sobre el bienestar. Se trata de la felicidad, el equilibrio y prosperidad. El nuevo mercado de seguro de salud de California quiere ser su socio en estar bien y vivir la vida al máximo. Queremos ayudarle a manejar su salud mediante la prevención y seguro de salud de calidad accesible. En el mercado, usted encontrará planes económicos y de alta calidad que lo/la pueden poner en el camino hacia el bienestar verdadero.”

Appendix XII – Promotional Channels (English)

Ways to Reach People

1. Online
2. Social Media
3. Mobile
4. Mail
5. Television
6. Local Newspaper
7. My pharmacy
8. My Health center or clinic
9. The workplace
10. Community based organizations I know and trust

Appendix XIII – Promotional Channels (Spanish)

Maneras de Comunicarse con la Gente

1. Internet
2. Medios de comunicación social como Facebook o Twitter
3. Telefono Celular
4. Correo
5. Televisión
6. Periódico local
7. Mi farmacia
8. Mi centro de salud o clínica
9. Mi trabajo
10. Organizaciones comunitarias que conozco y confié

Appendix XIV – Sources/Messengers (English)

Sources of Information

1. Governor Jerry Brown
2. My mayor, county supervisor or state senator
3. My priest or pastor
4. My doctor
5. Friends
6. My spouse/partner or other family members
7. President Obama
8. Sen. Dianne Feinstein
9. Healthy Families Program
10. Blue Shield and other health insurance companies
11. Consumer watchdogs/advocates
12. My employer
13. Legal aid organizations
14. County eligibility workers/application assistants
15. Schools, colleges, and universities
16. State of California Department of Public Health

Appendix XV – Sources/Messengers (Spanish)

Fuentes de Información

1. El gobernador Jerry Brown
2. Mi concejal o presidente municipal, supervisor del condado o senador del estado
3. Mi sacerdote o pastor
4. Mi doctor
5. Amigos
6. Mi cónyuge/pareja u otros miembros de la familia
7. El Presidente Obama
8. Senadora Dianne Feinstein
9. Programa de Healthy Families
10. Blue Shield y otras compañías de seguro de salud
11. Defensores del consumidor
12. Mi empleador
13. Organizaciones de ayuda legal
14. Trabajadores de elegibilidad del Condado o asistentes de solicitudes
15. Escuelas, colegios y universidades
16. Departamento de Salud Pública del estado de California